

Laparoscopic Inguinal (groin) Hernia Repair with Mesh (plastic)

Pre- Operative Instructions

Dr. Sitara Kommareddi

Office: 520-512-5757

**** call 7-10 days before surgery to get meds****

An assistant is used in some procedures. If your insurance does not cover, you will receive a bill for their services.

Booking/Arrival/Transport to O.R.:

- Our office will contact you regarding time, place, time of arrival and instructions about surgery.
- **Nothing to eat or drink from midnight night before procedure or as my office directs you . Your case may be cancelled otherwise.**
- Meds may be taken with sips as usual. You may be asked to stop certain medications before or on the day of surgery.
- You are usually asked to arrive 2 hours before your scheduled time.
- Upon arrival, you'll meet your O.R. team including your anesthesiologist. After discussion, you will receive a mild intravenous sedative and taken to the O.R. where you will be further sedated and then undergo placement of tube through your mouth into your lungs to deepen anesthetic. You will not be aware of this tube being placed or removed, but you will likely have a sore throat for a few days.
- You must have a friend/family member to take you home and ideally stay with you the first night. Otherwise a meditaxi may be arranged via your insurance company. You are responsible for arranging appropriate transport. If suitable transport is not available, your procedure may be cancelled.
- **You may not go home in a regular taxi or bus.**
- **What to do to prepare/what to get ready:**
 - **Show in hibiclens on am of surgery(get generic at walgreens).Use it just like soap but apply on skin for 60 seconds and wash off. Specifically also apply to area of surgery.**
 - **If possible obtain before surgery, from the drugstore: ibuprofen, acetaminophen (Tylenol) , colace, and any prescriptions I've provided.**
 - **Have water /snacks at bedside so meds may be taken with them.**
 - **Pillows to prop up on and to press to abdomen while coughing sneezing etc.**

- **Ice packs available. Band-aids or Extra Gauze and tape helpful if you have oozing. May be obtained at drugstore without prescription.**
- **Snug boxers or jockeys will help pain, so have ready at home.**

After the procedure:

- You will stay in the recovery area for at least 2 hours, potentially longer depending on any medical issues.
- I will speak with any family/friends waiting for you, review operative findings, and review instructions.
- Prior to Discharge, you will have an opportunity to review instructions with the R.N. staff and your family/friends.

Postoperative expectations/Restrictions:

- **Wound pain/Groin pain** is present, and usually significant for 3-5 days, starts to diminish by 2 weeks, but will be present to varying degrees for several months. You may also have some of the same symptoms you've had before surgery. These will take a few day/weeks, rarely months to recover. **As you increase activities, these symptoms may reoccur periodically, indefinitely.**
- **Hard lump in the groin** over the area of the hernia may be present. This is fluid in the hernia tract and will resolve over weeks to months. **This lump may extend into the scrotal sac.**
- Bruising, aching, hot/cold sensation, tingling numbness in the groin, genitalia, thigh are common in the first few weeks also. Rarely, patients have for months or years, usually improving over time.
- **Activity: No lifting more than 15 lbs for two weeks.** Avoid swimming, running, golf, etc for that period of time. After this period of time, you may slowly resume usual activities as your symptoms allow.
- You may have fatigue, nausea, constipation and bloating for a few days to few weeks.
- **Burning with urination** is common for one – two days. If it persists past then, or if you have a fever more than 101, please call.
- **Urinary retention** occurs in some patients with inability to urinate. If you are unable to urinate 6 hour after you get home, please call. **Ultimately if this does not resolve spontaneously, I will ask you to present to an ER for bladder check and possibly a 12 French bladder catheter placement.** The catheter is usually left in for 5-7 days, with removal in my clinic.
- **Travel** should be avoided for 2 weeks after the procedure, if possible.
- **Driving should** be avoided for 5 days. Subsequently, drive if you are fully alert, not on narcotics, and feel you can appropriately react to any driving stressor.
- **Home medications** may be resumed as usual upon arrival home. Specific instructions may be given regarding certain medications such as blood thinners.
- **Diet** is as usual. Heavy meals within the first 1-2 days may worsen nausea.
- **Alcohol** should be avoided for the first 5 days.

- **Wound care:** The clear tape and gauze over wounds should be removed 48 hours after surgery. You may shower with it on and off. Shower as usual . Let soapy water run over white strips (steristrips). Pat dry. If needed reapply Band-Aid. **Steristrips may fall off, or you may remove in 10 days or I will remove if you wish.**
- **Showers:** You may shower the morning after surgery. Do not soak in water for 2 weeks.

For Pain relief: Take meds with food/water

- Ice on the wounds and the groin 20 minutes at a time, 2-3 x a day is helpful
- #1 Ibuprofen 600 mg -800 mg every 8 hours (avoid if gastritis, ulcers, inflammatory bowel disease, intolerance to this drug, kidney failure/kidney removal or if on blood thinners). Obtain at drugstore, no need for prescription. **Try taking regularly for 3 days.**
- #2 A narcotic . If #1 not enough you may take the ibuprofen and narcotic together . You may take them at the same time or stagger them by 2-4 hours.
- #3 Any other med you and I agree as a supplement to the above two.
- #4 **Most men find snug jockey type undergarments helpful for pain relief for 2-4 weeks.**

For Nausea:

- #1 Promethazine or ondansetron (you will receive a prescription).
- #2 Benadryl 12.5 – 25 mg by mouth every 8 hours if #1 not enough. This may be obtained at drugstore without prescription.
- #3 Any other med we decide on if the above not helpful.

Treatment of Constipation:

If you do not have a bowel movement within 24 hours after surgery, then:

- #1 Colace 100 mg by mouth in am and pm. If not enough to help in 24 hours, then stay on it and add:
- #2 Milk of Magnesia 30 ml by mouth once a day. If no B.M. 24 hours later, then stop it, stay on colace and add:
- #3 Magnesium Citrate 1 bottle once by mouth . Take ice cold, poured over ice, rapidly over 1 hour, along with large glass of cold water. If no B.M. in 24 hours:
- #4 Repeat magnesium citrate ½ bottle by mouth once again and take a Fleets enema.
- #5 If none of the above work, call me for other options.

All may be obtained at the drugstore without a prescription.

Itching:

- #1 Benadryl 25 mg tablet by mouth every 8 hours.
- #2 Once white strips off of wounds, try Benadryl ointment or topical steroid ointment to areas of itching 3-4 x a day. **Both are available at drugstore without prescription.**

Blistering at wound site:

White strips on wounds (steri-strips) can cause blistering or redness in some patients. . **If this occurs you may remove them anytime and let me know.** If not helpful, please call.

Time off from Work/School:

- Plan on taking 7-14 days off. You may return once you feel you can work a full day as long as you follow restrictions.
- Please let me know if you need a **work release**. You may get it on day of follow up or we can fax to number you provide. Please be specific as to when you want to go back to work and if you need us to specify restrictions.
- **Any disability paperwork may be dropped off. We may take 5-7 days to complete. There is a fee of \$25.00.**

Follow Up:

- Call our office within a day or two after surgery (on a standard business day) to make a followup appointment for 2 weeks. You may also make a follow up appointment on the day you are contacted with your scheduling info.
- Call if you have Temp > 102, persistent, vomiting, worsening pain, redness that rapidly worsens or if you are unable to urinate 6 hour after you arrive home.

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